



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

SEP 10 1997
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Elliott M. Levine, Treasurer
3rd Congressional District
Democratic Party of Wisconsin
403 South 13th
Lacrosse, WI 54601

Identification Number: C00009456

Reference: October Quarterly (7/1/96-9/30/96) and 30 Day Post-General (10/1/96-11/25/96) Reports

Dear Mr. Levine:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion(s) attached) discloses a receipt(s) of \$1,200 and \$250 from the 3rd Congressional District Democratic Party of Wisconsin State Account. Please clarify whether this transfer(s) is from an account maintained by your committee for non-federal activity. If so, be advised that such a transfer is prohibited by 11 CFR §102.5(a)(1)(i) and the full amount of the transfer(s) should be returned to the non-federal account. Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out. In addition, the transfer-out should be disclosed on Schedule B supporting Line 22 of your next report.

If this transaction represents an "internal transfer" of funds from one federal account to another, and the source(s) of such funds has been identified in previous reports of receipts and disbursements, please note that such transfers should not be itemized as doing so inflates total receipts and cash on hand. If this is the case, please amend your report accordingly.

Although the Commission may take further legal action regarding the acceptance of funds from a non-federal account, your prompt transfer-out of

the impermissible funds or clarification of the transaction, will be taken into consideration.

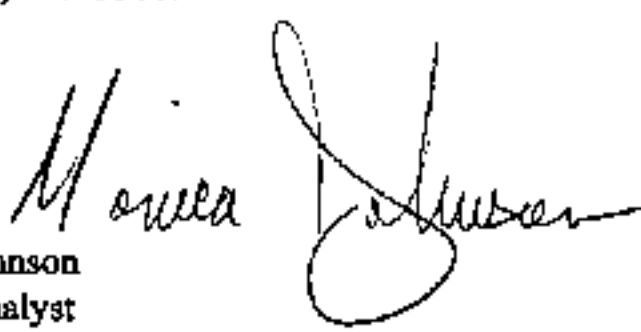
-Your report discloses no payments for administrative expenses. Each committee utilizing separate federal and non-federal accounts is required to allocate any administrative expenses between the accounts in proportion to the BALLOT COMPOSITION METHOD derived from FEC Schedule H1. A Schedule H1 must be filed with the first FEC FORM 3X submitted each year. 11 CFR §106.5(d)

Any goods or services provided to your committee by a person, except volunteer activity (i.e., a person's time), would be considered an in-kind contribution from that person, and would be subject to the disclosure requirements of 2 U.S.C. §434(b)(3) and 11 CFR §104.13, and the limitations and prohibitions of 2 U.S.C. §§441a and 441b.

Clarification regarding administrative expenses should be disclosed during each two year election cycle beginning with the first report filed in the non-election year. Please provide the necessary information regarding administrative expenses incurred by your committee and/or amend your report to disclose such expenses according to the referenced provisions of the Act and Commission Regulations.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,


Monica Johnson
Reports Analyst
Reports Analysis Division

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER 11. C.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

3rd Congressional District Democratic Party of Wisconsin

A. Full Name, Mailing Address and ZIP Code

3rd Congressional Dist. Dem. Party of Wisconsin
Ellen A. Leckie Treasurer
463 S. 13th St.
LaCrosse WI 54601

Receipt For:

☐ Primary☐ General☒ Other (specify): Membership Fee for Committee

Name of Employer

Occupation

Date (month,
day, year)

9/11/96

Amount of Each
Receipt (this Period)

1200.00

Aggregate Year-to-Date

1200

B. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt (this Period)

Aggregate Year-to-Date

\$

C. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt (this Period)

Aggregate Year-to-Date

\$

D. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt (this Period)

Aggregate Year-to-Date

\$

E. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt (this Period)

Aggregate Year-to-Date

\$

F. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt (this Period)

Aggregate Year-to-Date

\$

G. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt (this Period)

Aggregate Year-to-Date

\$

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

1200.00